SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:						PAGE	. 2	28 OF		47
	(0	(check only one)									
		×	11a		11b		11c		12		
			13		14		15		16		17
not be sold or used by any person for the purpose of soliciting contributions dress of any political committee to solicit contributions from such committee.											

Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and add NAME OF COMMITTEE (In Full) State Farm Mutual Automobile Insurance Company Federal Political Action Committee (State Farm Federal PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Thorp, Bill, , , Date of Receipt Mailing Address 1099 SE Oriole St 2018 City Zip Code State Transaction ID: 46FD92C20FA5DBC88752 OR **Grants Pass** 97526-4000 Amount of Each Receipt this Period FEC ID number of contributing C 83.32 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) State Farm Agent Self Employed Receipt For: Aggregate Year-to-Date ▼ Primary General 733.28 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Wang, Michael, , , Date of Receipt Mailing Address 22522 Bowens Wharf PI 2018 City State Zip Code Transaction ID: 44FDAC1D964D21362275 VA Ashburn 20148-6634 Amount of Each Receipt this Period FEC ID number of contributing 208.50 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) State Farm Area Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 1459.50 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Waterman, Analene, , , Date of Receipt Mailing Address 8749 Darley Rd SE 23 2018 City State Zip Code Transaction ID: 4460B3185055177006C6 OR Aumsville 97325-9751 Amount of Each Receipt this Period FEC ID number of contributing C 125.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Self Employed State Farm Agent Receipt For: Aggregate Year-to-Date ▼ Primary General 1125.00 Other (specify) 416.82 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....